



PTO/SB/01 (10-01)
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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☒ Declaration
Submitted With Initial
Filing **OR** ☐ Declaration
Submitted after Initial
Filing (surcharge
(37 CFR 1.16 (e))
required)

Attorney Docket Number FA1193 US NA
First Named Inventor Michael Wimmer

COMPLETE IF KNOWN

Application Number /
Filing Date February 27, 2004
Group Art Unit
Examiner Name

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Process For The Production Of Electrical Steel Sheet Cores

the specification of which (Title of the Invention)

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) as United States Application Number or PCT International

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number or Bar Code Label		<div style="border: 2px solid black; padding: 5px; display: inline-block;"> *23906* 23906 <small>PATENT TRADEMARK OFFICE</small> </div>		OR <input type="checkbox"/> Correspondence address below	
Name					
Address					
City		State		ZIP	
Country		Telephone		Fax	
<small>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</small>					
NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Michael <small>(first and middle [if any])</small>			Family Name Wimmer <small>or Surname</small>		
Inventor's Signature <i>Michael Wimmer</i>				Date <i>March 23, 2004</i>	
Residence: City		State		Country	
				Austria <small>Citizenship</small>	
Mailing Address					
Moedling		State		Zip	
City				Austria <small>Country</small>	
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name Anita <small>(first and middle [if any])</small>			Family Name Dopler <small>or Surname</small>		
Inventor's Signature <i>Anita Dopler</i>				Date <i>March 23, 2004</i>	
Residence: City		State		Country	
				Austria <small>Citizenship</small>	
Mailing Address					
Krumbach		State		Zip	
City				Austria <small>Country</small>	
<input checked="" type="checkbox"/> Additional inventors are being named on the <u>1</u> supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.					



Please type a plus sign (+) inside this box



PTO/SB/81 (02-01)
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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	Unknown
Filing Date	February 27, 2004
First Named Inventor	Michael Wimmer
Title	Process For The Production Of Electrical Steel Sheet Cores
Group Art Unit	Unknown
Examiner Name	Unknown
Attorney Docket Number	FA1193 US NA

I hereby appoint:

☒ Practitioners at Customer Number

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Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Michael Wimmer
Signature	
Date	March 23, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 2 forms are submitted.

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☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Certificate under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Anita Dopler
Signature	<i>Anita Dopler</i>
Date	Jan 23, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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